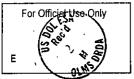
U.S. Department of Labor
Office of Labor-Management
Standards
Washington, DC 20210

# FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

E OLMS				
1. File Number U - 12950		2. Fiscal Year Covered From:		
		1 / 1 / 2004 Through: 12 / 31 / 2004		
3. Name and address of	person filing.	4. Name, file number, and address of labor organization.		
Name Duncan	W Crabtree-Ireland	Name Screen Actors Guild, Inc.		
		Labor Organization File Number 000-113		
P.Q. Box, Bldg., Room N	lo., if any 7th Fl.	P.O. Box, Building and Room Number, if any		
Street 5757 Wilsh	ire Blvd.	Street 5757 Wilshire Blvd.		
City Los Angeles		City Los Angeles		
State California	ZIP Code + 4 90036-3600	State California ZIP Code + 4 90036-3600		
5. Position in labor organi	Deputy General Counsel			
	(except as specified in the exc	ouse or minor child directly or indirectly had any of the following interests lusions set forth in the instructions):		
A. Held an interest in, e monetary value <b>from a</b>	ngaged in transactions (including loans) with, o n employer whose employees your organiza	r derived income or other economic benefit of tion represents or is actively seeking to represent.		
6. Name and address of E	imployer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room I	No., if any			
Street	**************************************	7.b. Amount.		
City		·		
State	ZIP Code + 4			
	Sig	nature		
submitted in this report	ification. The undersigned declares, under penalty of (including the information contained in any accompaing ge and belief, true, correct, and complete. (See the s	of Perjury and other applicable penalties of the law, that all of the information mying documents), has been examined by the signatory and is, to the best of the ection on penalties in the instructions.)		
Signed	very	On <u>8/12/05</u> (323) 549-6043  Date Telephone Number		

Name of Person Filing Duncan Crabtree-Ireland	File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any).	9. Business deals with:			
Name Lexis Nexis				
Trade Name, if any:	a. Labor Organiza	ation		
P.O. Box, Bldg., Room No., if any Ste. 1900	b. Trust			
Street 611 W. Sixth St.	Outdoor radio			
City Los Angeles				
State California ZIP Code ÷ 4 90017				
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deal	- · · · · · · · · · · · · · · · · · · ·		
Name	Provider of online for Screen Actors	e legal and public records research Guild		
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street	11.b. Approximate dollar val	lue of such dealing.		
City	12.a. Nature of interest he	1 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -		
State ZIP Code + 4	One meal, several	small gifts		
	12.b. Amount.	\$50 <sup>1</sup>		
	12.b. Amount.	1		
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any	Permitty path see may be reserved.			
Street	discount and a second a second and a second			
City				
State ZIP Code + 4				
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.			
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Name of Person Filing Duncan Crabtree-Ireland	File Number U-
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### Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Doyle Miller LLP	a. Labor Organization	
Trade Name, if any:	\ \-\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
P.O. Box, Bldg., Room No., if any Ste. 202	b. Trust	
Street 190 N. Canon Dr.	C. Employer	
City Beverly Hills		
State California ZIP Code + 4 90210		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Various industry employers, identities	Legal representation	
Trade Name, if any: unknown		
P.O. Box, Bldg., Room No., if any		}
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
	One lunch.	-
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	12.b. Amount.	\$35
4	12.0. Amount.	اددد

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Name of Person Filing Duncan Crabtree-Ireland

## Part B Continuation Page

File Number U-

8. Name and address of Business (including trade name, if any).		9. Business deals with:	
Name Rutan & Tucker LLP		a. Labor Organization	
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any Ste.	1400	b. Trust	
Street 611 Anton Blvd.		c. Employer	
City Costa Mesa	tip talgeties and these to the control of the contr		
State California	ZIP Code + 4 92626-1931		
10. If 9.b. or 9.c. is checked give trust or em	ployer's name.	11.a. Nature of such dealing.	
Name		Law firm representing Screen Actors	s Guild.
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City	* ·		
State	ZIP Code + 4	11.b. Approximate dollar value of such dealing.	
		12.a. Nature of interest held or income received.	
		One lunch.	
			!
		12.b. Amount.	\$35
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Name of Person Filing Duncan Crabtree-Ireland	File Number U-	

# Part B Continuation Page

8. Name and address of Business (inclu	iding trade name, if any	9. Business deals with:
Name O'Melveny & Myers LLP		a. Labor Organization
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any 1.7tl	n Fl.	b. Trust
Street 610 Newport Center Dr.		c. Employer
City Newport Beach		
State California	ZIP Code + 4 9266	
10. If 9.b. or 9.c. is checked give trust or er	nployer's name.	11.a. Nature of such dealing.
Name		Law firm representing Screen Actors Guild
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State	ZIP Code + 4	11.b. Approximate dollar value of such dealing.
		12.a. Nature of interest held or income received.
		One dinner.
1		12.b. Amount. \$60

Name of Person Filing Duncan Crabtree-Ireland	File Number U-			
Part B Continuation Page				
B. Held an interest in or derived income or economic benefit with monetary value or leasing to, or otherwise dealing with the business of an employer whose employ (2) any part of which consists of buying from or selling or leasing directly or indirect your labor organization is interested.	byees your labor organization represents or is actively seeking to represent, or			
8. Name and address of Business (including trade name, if any).  Name Katten Muchin Rosenman LLP  Trade Name, if any:  P.O. Box, Bldg., Room No., if any Ste. 2600  Street 2029 Century Park East  City Los Angeles  State California ZIP Code + 4 90067-3012	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer			
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name Various industry employers, identities  Trade Name, if any: unknown  P.O. Box, Bldg., Room No., if any  Street  City	11.a. Nature of such dealing.  Legal representation.			
State ZIP Code + 4	11 h. Approximate dollar value of such dealing	٦		

12.a. Nature of interest held or income received.

Guest at social event.

12.b. Amount.

unknown

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Name of Person Filing Duncan Crabtree-Ireland	File Number U-

### Part B Continuation Page

8. Name and address of Business (including	g trade name, if any).	9. Business deals with:	
Name Lord Bissell & Brook LLP		a. Labor Organization	
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any Ste. 8	000	b. Trust	
Street 300 S. Grand Ave.		c. Employer	
City Los Angeles			
State California	ZIP Code + 4 90071		
10. If 9.b. or 9.c. is checked give trust or emplo	oyer's name.	11.a. Nature of such dealing.	
Name Various industry employe	ers, identities	Legal representation.	
Trade Name, if any: unknown			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State	ZIP Code + 4	11.b. Approximate dollar value of such dealing.	
		12.a. Nature of interest held or income received.	
		One lunch.	
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		12.b. Amount.	\$35